

## A&D/TBI – Waiver Services Supplemental – Adult Day Service

The waiver includes adult day services, attendant care, case management, homemaker, residential based habilitation, respite care, structured day program, supported employment, behavior management/behavior program and counseling, environmental modifications, healthcare coordination, occupational therapy, personal emergency response system, physical therapy, specialized medical equipment and supplies, speech-language therapy and transportation. These are waiver services options that can be provided and will be services that people are receiving. Not everyone will be receiving the same services, however. Some will receive Physical Therapy or Transportation or Attendant Care, or some other service that reflects their needs.

The **Person Centered Compliance Tool** will be supplemented with the following tool depending on what waiver service the person is currently receiving. A review of the POC/CCB will determine what services the person has. The reviewer will determine by reviewing the POC/CCB and talking with the Case Manager the exact services the person has. By so doing, the Reviewer will take the appropriate supplemental Provider Review Tool to complete the Review. The following is an example of that supplemental Provider Review Tool for a person who is receiving: **Adult Day Service**.

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<b>Waiver Services: Adult Day Service</b> <b>Waiver Assurances</b>  <b>Recommended Probes</b>		<b>Discovery Mechanisms</b>  Discovery mechanisms are not meant to be inclusive. They are meant to be suggestions to gather information for the Reviewer. Guidelines are intended to help the Reviewer to make decisions about the presence or absence of the Indicators. The Discovery mechanisms listed here in no way imply they are meant to be directives for completion, or a requirement to be answered in every instance.		
<b>Adult Day Service:</b> <b>Desired Outcome:</b> <i>Adult Day Service (ADS) is a community-based group program designed to meet the needs of adults with impairments through individual plans of care. They are structured, comprehensive, non-residential programs. They provide health, social, recreational, therapeutic activities, supervision, support services and personal care. Meals that constitute 1/3 of the daily Recommended Dietary Allowance are required. Services are provided in a congregate, protective setting.</i>		<b>Spending Time With People</b>  (Initially during the conversation with the person using the Personal Outcome Measures®, then throughout the Review process.)  <b>Examples only:</b> specific situations may change observations.	<b>Conversations With People</b>  <b>Selected Examples only:</b> specific situations may change conversations with people.	<b>Review of Documents</b>  <b>Examples only:</b> specific situations may change documents needing review.
<b>Basic Adult Day Services (Level 1)</b>	<b>ADS I.A.1</b> The individual receives Level I services by qualified staff as documented in the individual's Plan of Care/Cost Comparison Budget	<b>Observe</b> for any of the services being provided.  <b>Note</b> how the services are	<b>Ask</b> the person what kinds of services are provided.	<b>Review</b> the POC/CCB to determine what services are required in Adult Day Services.

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	<p><b>(POC/CCB)</b></p> <ol style="list-style-type: none"> <li>Does the individual receive monitoring and/or supervision in all activities of daily living (ADL) such as               <ol style="list-style-type: none"> <li>Dressing;</li> <li>Bathing;</li> <li>Grooming;</li> <li>Eating;</li> <li>Walking;</li> <li>Toileting?</li> </ol> </li> <li>Does the individual receive hands-on assistance to complete ADLs as necessary?</li> <li>Does the person receive services with comprehensive, therapeutic activities?</li> <li>Is a health assessment completed for the individual?</li> <li>Is there intermittent monitoring of the individual's health status?</li> <li>Is the individual's medication being monitored?</li> <li>If the individual takes his/her own medication, is that self-administration monitored as needed?</li> <li>If the individual has a mild cognitive impairment, does he/she receive services for appropriate structure and supervision?</li> <li>Does the Adult Day Service for this individual provide a staffing ratio of no more than eight (8) individuals served by one staff?</li> </ol>	<p>being provided; hands on if needed, or verbal reminders.</p> <p>Observe if the individual takes his/her own medication.</p> <p>Note the staff/individual ratios in the service areas.</p> <p>Observe facility for hazards, cleanliness, exits, fire extinguishers, working smoke alarms.</p>	<p>Ask the person if the services are adequate.</p> <p>Ask the person how often the provider gives the services.</p> <p>Ask the person how much service he/she needs with medication.</p> <p>Ask the staff providing the services how much service is given.</p> <p>Ask the direct service staff if medication service is needed.</p> <p>Ask the Case Manager how adult day services are monitored to adequately meet the person's needs.</p>	<p>Review any assessment completed that describes the needs for the person regarding health.</p> <p>Review any medication administration records that describe the person's medication administration.</p> <p>Review any individualized or routine schedules that may relate to the individual and the services provided.</p> <p>Review any staff schedules that document the number of staff on duty when the individual is present.</p>
Enhanced Adult Day Services (Level 2)	<p><b>ADS I.B.1 In addition to the services in Level I, the individual receives Level 2 services by qualified staff as documented in the individual's Plan of Care (POC)</b></p> <ol style="list-style-type: none"> <li>Does the individual receive services with hands-on assistance with at least</li> </ol>	<p>Observe the level of services being provided to the individual.</p> <p>Observe if "hands-on" assistance is provided for various forms of personal</p>	<p>Ask the person what levels of services are being provided.</p> <p>Ask the person what services he/she needs or wants.</p>	<p>Review the CCB/POC for the appropriate level of service provided.</p> <p>Review any daily routine schedules with which the person is served.</p>

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	<p>two (2) ADLs, or hands-on assistance with bathing or other personal care?</p> <p>2. Does the individual receive a health assessment with regular monitoring or intervention with health status?</p> <p>3. Does the individual receive supervision with dispensing medication as needed, or is it dispensed totally?</p> <p>4. Does the individual receive services with assessment of psychosocial needs?</p> <p>a. Are those needs that were identified being addressed?</p> <p>b. Is counseling being provided if needed for the individual and the caregivers?</p> <p>5. Does the individual receive services through therapeutic structure, supervision and intervention if the individual has a mild to moderate cognitive impairment?</p> <p>6. Does the Adult Day Service for this individual provide a staffing ratio of no more than six (6) individuals served by one staff?</p> <p>7. Are there detailed information sheets for the individual including who to call in an emergency, physician contact, hospital preferences?</p> <p>8. Are meals and snacks, if provided, nutritious and appropriate for the individual's dietary needs?</p>	<p>care.</p> <p><b>Observe the medication being given to determine the level of services provided.</b></p>	<p><b>Ask the person if he/she receives adequate or not enough services.</b></p> <p><b>Ask the person if there are services that have been asked for that are not provided.</b></p> <p><b>Ask the direct service staff what services are being provided.</b></p> <p><b>Ask the direct service staff if the person is supported to take personal medication.</b></p> <p><b>Ask the Case Manager how adult day services are monitored to adequately meet the person's needs.</b></p>	<p><b>Review any documentation that relays information about the person's social contacts.</b></p> <p><b>Review any assessments relative to the person's psychosocial needs.</b></p> <p><b>Review any records available that relates to counseling that might be provided to the person.</b></p> <p><b>Review the staff working roster for on-duty staff during the time the person is present at the service.</b></p>
<b>Intensive Adult Day Services (Level 3)</b>	<p><b>ADS I.C.1 In addition to the services in Level I and II, the individual receives Level 3 services by qualified staff as documented in the individual's Plan of Care (POC)</b></p> <p>1. Does the individual receive services</p>	<p><b>Observe the level of services being provided to the person.</b></p> <p><b>Observe the health services being provided.</b></p>	<p><b>Ask the person to explain the types of services received.</b></p> <p><b>Ask the direct service staff to describe the</b></p>	<p><b>Review the POC/CCB for the types and level of services.</b></p> <p><b>Review any daily routines for services in</b></p>

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	<p>through hands-on assistance for all ADLs and personal care?</p> <p>2. Does the individual receive services in at least one (1) direct health intervention(s)?</p> <p>3. Does the individual receive services in rehabilitation and restorative services that include physical therapy, speech therapy, and occupational therapy being coordinated or available?</p> <p>4. Does the individual receive therapeutic intervention to address dynamic psychosocial needs such as depression or family issues affecting care?</p> <p>5. Do those individuals diagnosed with moderate to severe cognitive impairments receive therapeutic interventions?</p> <p>6. Is the minimum staff ratio at least one staff for each four individuals?</p> <p>7. If medications are to be managed during the time the individual is present at the ADS are those medication records maintained, current and accurate; are errors recorded and errors reported via DA Incident Report website?</p> <p>8. Are safety plans/emergency exits posted?</p>	<p><b>Observe if there are any services the person receives that relates to rehabilitation or restorative services.</b></p>	<p><b>services provided.</b></p> <p><b>Ask the Case Manager how adult day services are monitored to adequately meet the person's needs.</b></p>	<p><b>physical therapy, speech therapy or occupational therapy.</b></p> <p><b>Review any psychosocial notes or documentation that verifies the implementation of those services.</b></p> <p><b>Review the content of any therapeutic intervention programs.</b></p> <p><b>Review the direct service staff roster to determine if the ratios are not exceeding one staff for each four individuals.</b></p>
<b>Service Standards</b>	<p><b>ADS I.D.1 Each individual who receives Adult Day Services has an Individual Plan of Care (POC)</b></p> <p>1. Does the individual have a current POC?</p> <p>2. Is the written POC being followed?</p> <p>3. Are specific needs for the individual listed in the POC and have they been determined by the individual's</p>		<p><b>Ask the person if they are familiar with their POC.</b></p> <p><b>Ask the direct service staff to describe the services in the POC.</b></p> <p><b>Ask the direct service</b></p>	<p><b>Review the POC to determine the content of services needed.</b></p> <p><b>Review the verification of service implementation.</b></p> <p><b>Review any</b></p>

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	<p>assessment?</p> <p>4. Are activity sheets maintained for the individual?</p> <p>5. Are activities varied and scheduled for each day?</p> <p>6. Has a personal safety assessment been done by ADS?</p>		<p>staff to describe any assessments that support the needs of the person.</p>	<p>assessments that have been used to assess the person's needs.</p>
<p><b>Documentation Standards</b></p>	<p><b>ADS I.E.1 The implementation of services outlined in the CCB\POC are documented for the individual</b></p> <p>1. Does the CCB\POC outline the services the individual is to receive?</p> <p>2. Is there documented evidence that the individual required the level of service identified in the CCB\POC?</p> <p>3. Is there documented evidence of an attendance record that recorded the date of the service delivery and the number of units of service delivered each day?</p> <p>4. Is the completed Adult Day Service Level of Service Evaluation form completed and present?</p> <p>5. Is there documented evidence that no more than the maximum of 10 hours per day of Adult Day Services are provided?</p>		<p>Ask the direct service staff to describe the documentation procedures regarding service delivery.</p>	<p>Review the CCB\POC to determine if the levels of services are identified in the plan.</p> <p>Review the attendance record to determine the number of service units that have been provided.</p> <p>Review the attendance record to determine if the dates of service match the CCB\POC.</p> <p>Review the documentation that records the number of hours per day the Adult Day Services are provided.</p> <p>Review the <u>Level of Service Assessment/Evaluation for Adult Day Service</u> form to ensure that the correct level of services is consistent with what is being provided.</p>